

EXHIBIT A

	NAME	AFFILIATION	LAST KNOWN CONTACT INFORMATION	KNOWLEDGE
1	REDACTED	Former Occupational Therapist at Life Care of Bridgeton	REDACTED	(1) Pressure placed on Life Care facilities and/or rehabilitation therapists to meet corporate ultra high and/or length of stay targets; (2) Life Care's negative treatment of employees that failed to meet ultra high and/or length of stay targets; (3) the provision of therapy that was not medically reasonable or necessary; (4) the provision of therapy that was not skilled and/or not tailored to the needs of the particular beneficiary; (5) Life Care's knowledge of whether it was billing federal health care programs for therapy that was not reasonable or necessary and/or unskilled; and (6) the assessment of patients at Life Care facilities and the preparation of MDS forms.
2	REDACTED	Former Physical Therapist at Estero	REDACTED	(1) Life Care's corporate policies and practices to maximize ultra high billings; (2) targets set by Life Care management for Life Care regions, divisions and facilities related to ultra high billings and average lengths of stay; (3) pressure placed on Life Care division and/or regional personnel to meet corporate ultra high and/or length of stay targets; (4) pressure placed on Life Care facilities and/or rehabilitation therapists to meet corporate ultra high and/or length of stay targets; and (5) the involvement, if any, of physicians in therapy decisions.
3	REDACTED	Former Certified Occupational Therapy Assistant at Life Care Center of Inverrary	REDACTED	(1) Targets set by Life Care management for Life Care regions, divisions and facilities related to ultra high billings and average lengths of stay; (2) pressure placed on Life Care facilities and/or rehabilitation therapists to meet corporate ultra high and/or length of stay targets; (3) Life Care's negative treatment of employees that failed to meet ultra high and/or length of stay targets; and (4) the involvement, if any, of physicians in therapy decisions.
4	REDACTED	Former Life Care Director of Clinical Services for Rehab	REDACTED	(1) Life Care's corporate policies and practices to maximize ultra high billings; (2) targets set by Life Care management for Life Care regions, divisions and facilities related to ultra high billings and average lengths of stay; (3) pressure placed on Life Care division and/or regional personnel to meet corporate ultra high and/or length of stay targets; and (4) the provision of therapy that was not skilled and/or not tailored to the needs of the particular beneficiary.

5	REDACTED	CMS	c/o Andy Mao, U.S. Department of Justice, 601 D. St., NW, Washington, DC 20004; (202) 616-0539	(1) Rules, regulations or CMS policies and/or procedures governing the provision of, billing for, and/or coding for rehabilitation therapy services provided at skilled nursing facilities under Medicare Part A; and (2) guidance and training provided to facilities owned or operated by Life Care related to the provision of, billing for, and/or coding for rehabilitation therapy services provided at skilled nursing facilities under Medicare Part A.
6	REDACTED	Former Life Care Regional Rehabilitation Director	REDACTED	(1) Life Care's corporate policies and practices to maximize ultra high billings; (2) targets set by Life Care management for Life Care regions, divisions and facilities related to ultra high billings and average lengths of stay; (3) pressure placed on Life Care division and/or regional personnel to meet corporate ultra high and/or length of stay targets; (4) pressure placed on Life Care facilities and/or rehabilitation therapists to meet corporate ultra high and/or length of stay targets; (5) Life Care's rewarding of facilities or employees that met or exceeded ultra high and/or length of stay targets; and (6) Life Care's negative treatment of employees that failed to meet ultra high and/or length of stay targets.
7	REDACTED	Former OTL/RSM at Life Care of Citrus County	REDACTED	(1) Targets set by Life Care management for Life Care regions, divisions and facilities related to ultra high billings and average lengths of stay; (2) pressure placed on Life Care facilities and/or rehabilitation therapists to meet corporate ultra high and/or length of stay targets; (3) Life Care's rewarding of facilities or employees that met or exceeded ultra high and/or length of stay targets; and (4) the provision of therapy that was not medically reasonable or necessary.
8	REDACTED	Former Occupational Therapist at Life Care Port Orchard	REDACTED	(1) Pressure placed on Life Care facilities and/or rehabilitation therapists to meet corporate ultra high and/or length of stay targets; (2) Life Care's negative treatment of employees that failed to meet ultra high and/or length of stay targets; (3) the provision of therapy that was not medically reasonable or necessary; and (4) the provision of therapy that was not skilled and/or not tailored to the needs of the particular beneficiary.
9	REDACTED	Cahaba GBA (Cahaba)	c/o Andy Mao, U.S. Department of Justice, 601 D. St., NW, Washington, DC 20004; (202) 616-0539	Guidance and training provided to facilities owned or operated by Life Care related to the provision of, billing for, and/or coding for rehabilitation therapy services provided at skilled nursing facilities under Medicare Part A.

10	REDACTED	Former Physical Therapist at Life Care Center at Inverrary	REDACTED	(1) Life Care's corporate policies and practices to maximize ultra high billings; (2) pressure placed on Life Care facilities and/or rehabilitation therapists to meet corporate ultra high and/or length of stay targets; (3) the provision of therapy that was not medically reasonable or necessary; and (4) the involvement, if any, of physicians in therapy decisions.
11	REDACTED	Blue Cross Blue Shield of Tennessee (BCBS) (formerly employed by Riverbend)	REDACTED	Guidance and training provided to facilities owned or operated by Life Care related to the provision of, billing for, and/or coding for rehabilitation therapy services provided at skilled nursing facilities under Medicare Part A.
12	REDACTED	Wisconsin Physician Service Insurance Corp. (WPS)	c/o Andy Mao, U.S. Department of Justice, 601 D. St., NW, Washington, DC 20004; (202) 616-0539	Rules, regulations or TRICARE policies and/or procedures governing the provision of, billing for, and/or coding for rehabilitation therapy services provided at skilled nursing facilities to dual eligible TRICARE beneficiaries.
13	REDACTED	Former Life Care CCO & Sr. VP of Corporate Compliance (among other positions)	REDACTED	(1) Pressure placed on Life Care facilities and/or rehabilitation therapists to meet corporate ultra high and/or length of stay targets; (2) Life Care's rewarding of facilities or employees that met or exceeded ultra high and/or length of stay targets; (3) Life Care's negative treatment of employees that failed to meet ultra high and/or length of stay targets; (4) the provision of therapy that was not medically reasonable or necessary; (5) the provision of therapy that was not skilled and/or not tailored to the needs of the particular beneficiary; (6) the involvement, if any, of physicians in therapy decisions; and (7) Life Care's knowledge of whether it was billing federal health care programs for therapy that was not reasonable or necessary and/or unskilled.
14	REDACTED	Former Certified Occupational Therapy Assistant at Life Care Center at Inverrary	REDACTED	(1) Life Care's corporate policies and practices to maximize ultra high billings; (2) targets set by Life Care management for Life Care regions, divisions and facilities related to ultra high billings and average lengths of stay; (3) pressure placed on Life Care facilities and/or rehabilitation therapists to meet corporate ultra high and/or length of stay targets; (4) Life Care's negative treatment of employees that failed to meet ultra high and/or length of stay targets; (5) the provision of therapy that was not medically reasonable or necessary; and (6) the involvement, if any, of physicians in therapy decisions.

15	REDACTED	Former LPTA at Life Care Center of Inverrary	REDACTED	(1) Targets set by Life Care management for Life Care regions, divisions and facilities related to ultra high billings and average lengths of stay; (2) pressure placed on Life Care facilities and/or rehabilitation therapists to meet corporate ultra high and/or length of stay targets; (3) Life Care's negative treatment of employees that failed to meet ultra high and/or length of stay targets; and (4) the provision of therapy that was not medically reasonable or necessary.
16	REDACTED	TRICARE	c/o Andy Mao, U.S. Department of Justice, 601 D. St., NW, Washington, DC 20004; (202) 616-0539	Rules, regulations or TRICARE policies and/or procedures governing the provision of, billing for, and/or coding for rehabilitation therapy services provided at skilled nursing facilities to dual eligible TRICARE beneficiaries.
17	REDACTED	Former Speech Therapist at Life Care Center of Gwinnett	REDACTED	(1) Life Care's corporate policies and practices to maximize ultra high billings; (2) targets set by Life Care management for Life Care regions, divisions and facilities related to ultra high billings and average lengths of stay; (3) pressure placed on Life Care facilities and/or rehabilitation therapists to meet corporate ultra high and/or length of stay targets; (4) Life Care's negative treatment of employees that failed to meet ultra high and/or length of stay targets; (5) the provision of therapy that was not medically reasonable or necessary; and (6) the provision of therapy that was not skilled and/or not tailored to the needs of the particular beneficiary.
18	REDACTED	Former MDS Coordinator at Life Care Center at Inverrary		(1) Life Care's corporate policies and practices to maximize ultra high billings; and (2) the provision of therapy that was not medically reasonable or necessary.
19	REDACTED	Former Physical Therapy Assistant at Life Care Center of Yuma	REDACTED	(1) Life Care's corporate policies and practices to maximize ultra high billings; (2) pressure placed on Life Care facilities and/or rehabilitation therapists to meet corporate ultra high and/or length of stay targets; (3) the provision of therapy that was not medically reasonable or necessary; (4) the provision of therapy that was not skilled and/or not tailored to the needs of the particular beneficiary; and (5) the involvement, if any, of physicians in therapy decisions.

20	REDACTED	Former LPN / Asst. MDS Coordinator at Life Care of Orlando	REDACTED	(1) Targets set by Life Care management for Life Care regions, divisions and facilities related to ultra high billings and average lengths of stay; (2) the provision of therapy that was not medically reasonable or necessary; (3) the provision of therapy that was not skilled and/or not tailored to the needs of the particular beneficiary; (4) the involvement, if any, of physicians in therapy decisions; and (5) the assessment of patients at Life Care facilities and the preparation of MDS forms.
21	REDACTED	Former Physical Therapist at Life Care of St. Louis	REDACTED	(1) Pressure placed on Life Care facilities and/or rehabilitation therapists to meet corporate ultra high and/or length of stay targets; (2) Life Care's negative treatment of employees that failed to meet ultra high and/or length of stay targets; and (3) the provision of therapy that was not medically reasonable or necessary.
22	REDACTED	Former Rehab Service Manager at Life Care of LaCenter	REDACTED	(1) Life Care's corporate policies and practices to maximize ultra high billings; (2) targets set by Life Care management for Life Care regions, divisions and facilities related to ultra high billings and average lengths of stay; (3) pressure placed on Life Care division and/or regional personnel to meet corporate ultra high and/or length of stay targets; and (4) pressure placed on Life Care facilities and/or rehabilitation therapists to meet corporate ultra high and/or length of stay targets.
23	REDACTED	Former Rehab Director at Life Care Center of Yuma	REDACTED	(1) Targets set by Life Care management for Life Care regions, divisions and facilities related to ultra high billings and average lengths of stay; (2) pressure placed on Life Care division and/or regional personnel to meet corporate ultra high and/or length of stay targets; (3) pressure placed on Life Care facilities and/or rehabilitation therapists to meet corporate ultra high and/or length of stay targets; (4) Life Care's negative treatment of employees that failed to meet ultra high and/or length of stay targets; and (5) Life Care's knowledge of whether it was billing federal health care programs for therapy that was not reasonable or necessary and/or unskilled.
24	REDACTED	Former Occupational Therapist at Life Care of Citrus County	REDACTED	(1) Life Care's corporate policies and practices to maximize ultra high billings; and (2) the provision of therapy that was not medically reasonable or necessary.

25	REDACTED	Former Life Care Vice President of Rehab Services		(1) Life Care's corporate policies and practices to maximize ultra high billings; (2) targets set by Life Care management for Life Care regions, divisions and facilities related to ultra high billings and average lengths of stay; (3) pressure placed on Life Care division and/or regional personnel to meet corporate ultra high and/or length of stay targets; (4) pressure placed on Life Care facilities and/or rehabilitation therapists to meet corporate ultra high and/or length of stay targets; (5) Life Care's negative treatment of employees that failed to meet ultra high and/or length of stay targets; and (6) Life Care's knowledge of whether it was billing federal health care programs for therapy that was not reasonable or necessary and/or unskilled.
26	REDACTED	Former Speech Therapist at Life Care Center of Valparaiso	REDACTED	(1) Pressure placed on Life Care facilities and/or rehabilitation therapists to meet corporate ultra high and/or length of stay targets; (2) the provision of therapy that was not medically reasonable or necessary; and (3) the involvement, if any, of physicians in therapy decisions.
27	REDACTED	Former Vice President of Life Care's "Plains" region	REDACTED	(1) Life Care's corporate policies and practices to maximize ultra high billings; (2) targets set by Life Care management for Life Care regions, divisions and facilities related to ultra high billings and average lengths of stay; (3) pressure placed on Life Care division and/or regional personnel to meet corporate ultra high and/or length of stay targets; (4) pressure placed on Life Care facilities and/or rehabilitation therapists to meet corporate ultra high and/or length of stay targets; (5) Life Care's rewarding of facilities or employees that met or exceeded ultra high and/or length of stay targets; and (6) Life Care's negative treatment of employees that failed to meet ultra high and/or length of stay targets.

28	REDACTED	Former Physical Therapy Assistant at Life Care of St. Louis	REDACTED	(1) Targets set by Life Care management for Life Care regions, divisions and facilities related to ultra high billings and average lengths of stay; (2) pressure placed on Life Care division and/or regional personnel to meet corporate ultra high and/or length of stay targets; (3) pressure placed on Life Care facilities and/or rehabilitation therapists to meet corporate ultra high and/or length of stay targets; (4) the provision of therapy that was not medically reasonable or necessary; and (5) the provision of therapy that was not skilled and/or not tailored to the needs of the particular beneficiary.
29	REDACTED	Former Executive Director & Regional Vice President at Life Care of Lake Forrest	REDACTED	(1) Targets set by Life Care management for Life Care regions, divisions and facilities related to ultra high billings and average lengths of stay; (2) pressure placed on Life Care division and/or regional personnel to meet corporate ultra high and/or length of stay targets; (3) pressure placed on Life Care facilities and/or rehabilitation therapists to meet corporate ultra high and/or length of stay targets; (4) Life Care's rewarding of facilities or employees that met or exceeded ultra high and/or length of stay targets; and (5) Life Care's negative treatment of employees that failed to meet ultra high and/or length of stay targets.
30	REDACTED	Former Occupational Therapist at Heritage Center Nursing Home	REDACTED	(1) Pressure placed on Life Care facilities and/or rehabilitation therapists to meet corporate ultra high and/or length of stay targets; (2) the provision of therapy that was not medically reasonable or necessary; (3) the provision of therapy that was not skilled and/or not tailored to the needs of the particular beneficiary; and (4) the involvement, if any, of physicians in therapy decisions.
31	REDACTED	Former Physical Therapist at Life Care Puyallup	REDACTED	(1) Targets set by Life Care management for Life Care regions, divisions and facilities related to ultra high billings and average lengths of stay; (2) pressure placed on Life Care facilities and/or rehabilitation therapists to meet corporate ultra high and/or length of stay targets; (3) the provision of therapy that was not medically reasonable or necessary; and (4) the provision of therapy that was not skilled and/or not tailored to the needs of the particular beneficiary.
32	REDACTED	CMS	c/o Andy Mao, U.S. Department of Justice, 601 D. St., NW, Washington, DC 20004; (202) 616-0539	Rules, regulations or CMS policies and/or procedures governing the provision of, billing for, and/or coding for rehabilitation therapy services provided at skilled nursing facilities under Medicare Part A.

33	REDACTED	Former Occupational Therapist at Life Care of Bridgeton	REDACTED	(1) Life Care's corporate policies and practices to maximize ultra high billings; (2) targets set by Life Care management for Life Care regions, divisions and facilities related to ultra high billings and average lengths of stay; (3) pressure placed on Life Care division and/or regional personnel to meet corporate ultra high and/or length of stay targets; (4) pressure placed on Life Care facilities and/or rehabilitation therapists to meet corporate ultra high and/or length of stay targets; (5) the provision of therapy that was not medically reasonable or necessary; and (6) the provision of therapy that was not skilled and/or not tailored to the needs of the particular beneficiary.
34	REDACTED	CMS (former)	c/o Andy Mao, U.S. Department of Justice, 601 D. St., NW, Washington, DC 20004; (202) 616-0539	(1) Rules, regulations or CMS policies and/or procedures governing the provision of, billing for, and/or coding for rehabilitation therapy services provided at skilled nursing facilities under Medicare Part A; and (2) guidance and training provided to facilities owned or operated by Life Care related to the provision of, billing for, and/or coding for rehabilitation therapy services provided at skilled nursing facilities under Medicare Part A.
35	REDACTED	Former Occupational Therapist at Hilo	REDACTED	(1) Targets set by Life Care management for Life Care regions, divisions and facilities related to ultra high billings and average lengths of stay; (2) pressure placed on Life Care facilities and/or rehabilitation therapists to meet corporate ultra high and/or length of stay targets; (3) Life Care's negative treatment of employees that failed to meet ultra high and/or length of stay targets; (4) the provision of therapy that was not medically reasonable or necessary; and (5) the provision of therapy that was not skilled and/or not tailored to the needs of the particular beneficiary.
36	REDACTED	Former Physical Therapy Assistant at Life Care Center of Collegedale	REDACTED	(1) Life Care's corporate policies and practices to maximize ultra high billings; and (2) pressure placed on Life Care facilities and/or rehabilitation therapists to meet corporate ultra high and/or length of stay targets.

37	REDACTED	Former Life Care Divisional Rehab Director	REDACTED	(1) Life Care's corporate policies and practices to maximize ultra high billings; (2) targets set by Life Care management for Life Care regions, divisions and facilities related to ultra high billings and average lengths of stay; (3) pressure placed on Life Care division and/or regional personnel to meet corporate ultra high and/or length of stay targets; (4) pressure placed on Life Care facilities and/or rehabilitation therapists to meet corporate ultra high and/or length of stay targets; (5) Life Care's rewarding of facilities or employees that met or exceeded ultra high and/or length of stay targets; (6) Life Care's negative treatment of employees that failed to meet ultra high and/or length of stay targets; (7) the provision of therapy that was not medically reasonable or necessary; and (8) the provision of therapy that was not skilled and/or not tailored to the needs of the particular beneficiary.
38	REDACTED	Former MDS Coordinator at Life Care of St. Louis	REDACTED	(1) Pressure placed on Life Care division and/or regional personnel to meet corporate ultra high and/or length of stay targets; (2) pressure placed on Life Care facilities and/or rehabilitation therapists to meet corporate ultra high and/or length of stay targets; (3) Life Care's rewarding of facilities or employees that met or exceeded ultra high and/or length of stay targets; (4) Life Care's negative treatment of employees that failed to meet ultra high and/or length of stay targets; (5) the provision of therapy that was not medically reasonable or necessary; (6) the provision of therapy that was not skilled and/or not tailored to the needs of the particular beneficiary; (7) the involvement, if any, of physicians in therapy decisions; and (8) the assessment of patients at Life Care facilities and the preparation of MDS forms.
39	Glenda Martin	Relator	c/o Mark Simpson, Simpson Law Firm LLC, 165 North Main St., Jonesboro, GA 30236; (770) 371-5008	(1) Pressure placed on rehabilitation therapists to meet corporate ultra high and/or length of stay targets at Life Care facilities; (2) Life Care's treatment of employees that failed to meet ultra high and/or length of stay targets; (3) the provision of therapy that was not medically reasonable or necessary and/or not skilled or tailored to the needs of the particular beneficiary at facilities owned or operated by Life Care; and (4) the involvement, if any, of physicians in therapy decisions at facilities owned or operated by Life Care.

40	REDACTED	Former Rehab Director at Life Care Paradise Valley		(1) Life Care's corporate policies and practices to maximize ultra high billings; (2) targets set by Life Care management for Life Care regions, divisions and facilities related to ultra high billings and average lengths of stay; (3) pressure placed on Life Care division and/or regional personnel to meet corporate ultra high and/or length of stay targets; and (4) pressure placed on Life Care facilities and/or rehabilitation therapists to meet corporate ultra high and/or length of stay targets.
41	REDACTED	Former Occupational Therapist at Life Care Center at Inverrary		(1) Life Care's corporate policies and practices to maximize ultra high billings; (2) targets set by Life Care management for Life Care regions, divisions and facilities related to ultra high billings and average lengths of stay; (3) pressure placed on Life Care facilities and/or rehabilitation therapists to meet corporate ultra high and/or length of stay targets; (4) Life Care's negative treatment of employees that failed to meet ultra high and/or length of stay targets; (5) the provision of therapy that was not medically reasonable or necessary; and (6) the provision of therapy that was not skilled and/or not tailored to the needs of the particular beneficiary.
42	REDACTED	Former Rehabilitation Service Manager at Life Care of St. Louis	REDACTED	(1) Targets set by Life Care management for Life Care regions, divisions and facilities related to ultra high billings and average lengths of stay; (2) pressure placed on Life Care division and/or regional personnel to meet corporate ultra high and/or length of stay targets; (3) pressure placed on Life Care facilities and/or rehabilitation therapists to meet corporate ultra high and/or length of stay targets; (4) Life Care's negative treatment of employees that failed to meet ultra high and/or length of stay targets; (5) the provision of therapy that was not medically reasonable or necessary; and (6) the provision of therapy that was not skilled and/or not tailored to the needs of the particular beneficiary.

43	REDACTED	Former Speech Language Pathologist at Life Care Center of Gwinnett	REDACTED	(1) Life Care's corporate policies and practices to maximize ultra high billings; (2) pressure placed on Life Care facilities and/or rehabilitation therapists to meet corporate ultra high and/or length of stay targets; (3) Life Care's negative treatment of employees that failed to meet ultra high and/or length of stay targets; (4) the provision of therapy that was not medically reasonable or necessary; and (5) the provision of therapy that was not skilled and/or not tailored to the needs of the particular beneficiary.
44	REDACTED	Life Care's former Chief Operating Officer	REDACTED	(1) Life Care's corporate policies and practices to maximize ultra high billings; (2) targets set by Life Care management related to ultra high billings and average lengths of stay; (3) pressure placed on Life Care employees and facilities to meet corporate ultra high and/or length of stay targets; (4) Life Care's provision of therapy that was not medically reasonable or necessary and/or not skilled or not tailored to the needs of the particular beneficiary; and (5) Life Care's knowledge of whether it was billing federal health care programs for therapy that was not reasonable or necessary and/or unskilled.
45	REDACTED	Former Executive Director at Life Care of Inverrary	REDACTED	(1) Life Care's corporate policies and practices to maximize ultra high billings; (2) targets set by Life Care management for Life Care regions, divisions and facilities related to ultra high billings and average lengths of stay; (3) pressure placed on Life Care division and/or regional personnel to meet corporate ultra high and/or length of stay targets; (4) pressure placed on Life Care facilities and/or rehabilitation therapists to meet corporate ultra high and/or length of stay targets; and (5) Life Care's rewarding of facilities or employees that met or exceeded ultra high and/or length of stay targets.

46	REDACTED	Former Physical Therapy Assistant at Life Care Center of Collegedale	REDACTED	(1) Life Care's corporate policies and practices to maximize ultra high billings; (2) pressure placed on Life Care facilities and/or rehabilitation therapists to meet corporate ultra high and/or length of stay targets; (3) Life Care's rewarding of facilities or employees that met or exceeded ultra high and/or length of stay targets; (4) Life Care's negative treatment of employees that failed to meet ultra high and/or length of stay targets; (5) the provision of therapy that was not medically reasonable or necessary; and (6) the provision of therapy that was not skilled and/or not tailored to the needs of the particular beneficiary.
47	REDACTED	Former Vice President of Operations of Life Care at Home	REDACTED	Life Care's corporate policies and practices to maximize ultra high billings.
48	REDACTED	Former contract PT with Supplemental Health Care, who provided PT at Life Care Centers of Puyullap and Aubur	REDACTED	(1) Targets set by Life Care management for Life Care regions, divisions and facilities related to ultra high billings and average lengths of stay; (2) pressure placed on Life Care facilities and/or rehabilitation therapists to meet corporate ultra high and/or length of stay targets; (3) the provision of therapy that was not medically reasonable or necessary; (4) the provision of therapy that was not skilled and/or not tailored to the needs of the particular beneficiary; and (5) Life Care's knowledge of whether it was billing federal health care programs for therapy that was not reasonable or necessary and/or unskilled.
49	REDACTED	Life Care's founder, sole shareholder, and Chairman of the Board	c/o Scot Hasselman, Reed Smith LLP, 1301 K. St., NW #1100, Washington, DC 20005; (202) 414-9200	(1) Life Care's corporate policies and practices to maximize ultra high billings; (2) targets set by Life Care management related to ultra high billings and average lengths of stay; (3) pressure placed on Life Care employees and facilities to meet corporate ultra high and/or length of stay targets; (4) Life Care's provision of therapy that was not medically reasonable or necessary and/or not skilled or not tailored to the needs of the particular beneficiary; and (5) Life Care's knowledge of whether it was billing federal health care programs for therapy that was not reasonable or necessary and/or unskilled.

50	REDACTED	Former Life Care Senior Vice President of Integrity and Compliance	REDACTED	(1) Life Care's compliance and complaint handling function; (2) pressure placed on Life Care division and/or regional personnel, and/or Life Care facilities and/or rehabilitation therapists, to meet corporate ultra high and/or length of stay targets; and (3) Life Care's knowledge of whether it was billing federal health care programs for therapy that was not reasonable or necessary and/or unskilled.
51	REDACTED	Former RN/MDS Coordinator at Life Care Center at Inverrary	REDACTED	(1) Pressure placed on Life Care facilities and/or rehabilitation therapists to meet corporate ultra high and/or length of stay targets; and (2) the assessment of patients at Life Care facilities and the preparation of MDS forms.
52	REDACTED	Life Care's Senior Vice President of Rehabilitation Services	c/o Scot Hasselman, Reed Smith LLP, 1301 K. St., NW #1100, Washington, DC 20005; (202) 414-9200	(1) Life Care's corporate policies and practices to maximize ultra high billings; (2) targets set by Life Care management related to ultra high billings and average lengths of stay; (3) pressure placed on Life Care employees and facilities to meet corporate ultra high and/or length of stay targets; (4) Life Care's provision of therapy that was not medically reasonable or necessary and/or not skilled or not tailored to the needs of the particular beneficiary; and (5) Life Care's knowledge of whether it was billing federal health care programs for therapy that was not reasonable or necessary and/or unskilled.
53	REDACTED	Former Physical Therapist at Life Care Center of Yuma	REDACTED	(1) Life Care's corporate policies and practices to maximize ultra high billings; (2) targets set by Life Care management for Life Care regions, divisions and facilities related to ultra high billings and average lengths of stay; (3) pressure placed on Life Care facilities and/or rehabilitation therapists to meet corporate ultra high and/or length of stay targets; (4) Life Care's negative treatment of employees that failed to meet ultra high and/or length of stay targets; (5) the provision of therapy that was not medically reasonable or necessary; and (6) the provision of therapy that was not skilled and/or not tailored to the needs of the particular beneficiary.
54	REDACTED	Former Physical Therapist at Life Care Center at Inverrary	REDACTED	(1) Targets set by Life Care management for Life Care regions, divisions and facilities related to ultra high billings and average lengths of stay; and (2) the provision of therapy that was not medically reasonable or necessary.

55	REDACTED	Former Occupational Therapist / Contract Therapist at Life Care Center of Yuma	REDACTED	(1) Life Care's corporate policies and practices to maximize ultra high billings; (2) pressure placed on Life Care facilities and/or rehabilitation therapists to meet corporate ultra high and/or length of stay targets; (3) the provision of therapy that was not medically reasonable or necessary; and (4) the provision of therapy that was not skilled and/or not tailored to the needs of the particular beneficiary.
56	REDACTED	Former Occupational Therapist at Life Care of Citrus County	REDACTED	(1) Life Care's corporate policies and practices to maximize ultra high billings; (2) pressure placed on Life Care facilities and/or rehabilitation therapists to meet corporate ultra high and/or length of stay targets; (3) Life Care's negative treatment of employees that failed to meet ultra high and/or length of stay targets; (4) the provision of therapy that was not medically reasonable or necessary; and (5) the provision of therapy that was not skilled and/or not tailored to the needs of the particular beneficiary.
57	Tammy Taylor	Relator	c/o Anthony Vitale The Health Law Offices of Anthony C. Vitale, P.A. 2333 Brickell Ave., Suite A-1, Miami, FL 33129; (305) 358-4500	(1) Life Care's corporate policies and practices to maximize ultra high billings; (2) targets set by Life Care management for Life Care regions, divisions and facilities related to ultra high billings and average lengths of stay; (3) pressure placed on Life Care facilities and/or rehabilitation therapists to meet corporate ultra high and/or length of stay targets; (4) Life Care's negative treatment of employees that failed to meet ultra high and/or length of stay targets; (5) the provision of therapy that was not skilled and/or not tailored to the needs of the particular beneficiary; (6) the involvement, if any, of physicians in therapy decisions; (7) Life Care's knowledge of whether it was billing federal health care programs for therapy that was not reasonable or necessary and/or unskilled; and (8) the assessment of patients at Life Care facilities and the preparation of MDS forms.
58	REDACTED	Speech therapist at Life Care of Plymouth, Oaks at New Bedford, and Life Care of Raynham	REDACTED	(1) Life Care's corporate policies and practices to maximize ultra high billings; (2) targets set by Life Care management for Life Care regions, divisions and facilities related to ultra high billings and average lengths of stay; (3) pressure placed on Life Care facilities and/or rehabilitation therapists to meet corporate ultra high and/or length of stay targets; (4) the provision of therapy that was not medically reasonable or necessary; and (5) the provision of therapy that was not skilled and/or not tailored to the needs of the particular beneficiary.

59	REDACTED	Former OTA/PRN at Life Care of Citrus County	REDACTED	(1) Life Care's corporate policies and practices to maximize ultra high billings; (2) targets set by Life Care management for Life Care regions, divisions and facilities related to ultra high billings and average lengths of stay; (3) pressure placed on Life Care division and/or regional personnel to meet corporate ultra high and/or length of stay targets; (4) pressure placed on Life Care facilities and/or rehabilitation therapists to meet corporate ultra high and/or length of stay targets; (5) the provision of therapy that was not medically reasonable or necessary; (6) the provision of therapy that was not skilled and/or not tailored to the needs of the particular beneficiary; and (7) Life Care's knowledge of whether it was billing federal health care programs for therapy that was not reasonable or necessary and/or unskilled.
60	REDACTED	CMS	c/o Andy Mao, U.S. Department of Justice, 601 D. St., NW, Washington, DC 20004; (202) 616-0539	Rules, regulations or CMS policies and/or procedures governing the provision of, billing for, and/or coding for rehabilitation therapy services provided at skilled nursing facilities under Medicare Part A.
61	REDACTED	Former Physical Therapist at Life Care Charleston	REDACTED	(1) Life Care's corporate policies and practices to maximize ultra high billings; (2) pressure placed on Life Care facilities and/or rehabilitation therapists to meet corporate ultra high and/or length of stay targets; (3) the provision of therapy that was not medically reasonable or necessary; and (4) the provision of therapy that was not skilled and/or not tailored to the needs of the particular beneficiary.
62	REDACTED	Former Physical Therapist at Life Care Center of Collegedale	REDACTED	(1) Life Care's corporate policies and practices to maximize ultra high billings; (2) pressure placed on Life Care division and/or regional personnel to meet corporate ultra high and/or length of stay targets; (3) pressure placed on Life Care facilities and/or rehabilitation therapists to meet corporate ultra high and/or length of stay targets; (4) Life Care's rewarding of facilities or employees that met or exceeded ultra high and/or length of stay targets; (5) Life Care's negative treatment of employees that failed to meet ultra high and/or length of stay targets; (6) the provision of therapy that was not medically reasonable or necessary; and (7) the provision of therapy that was not skilled and/or not tailored to the needs of the particular beneficiary.

63	REDACTED	Former Life Care Regional Rehab Manager then Divisional Rehab Manager	REDACTED	(1) Life Care's corporate policies and practices to maximize ultra high billings; (2) targets set by Life Care management for Life Care regions, divisions and facilities related to ultra high billings and average lengths of stay; (3) pressure placed on Life Care division and/or regional personnel to meet corporate ultra high and/or length of stay targets; (4) pressure placed on Life Care facilities and/or rehabilitation therapists to meet corporate ultra high and/or length of stay targets; and (5) Life Care's negative treatment of employees that failed to meet ultra high and/or length of stay targets.
64	REDACTED	Former Life Care Executive Vice President of Rehab	REDACTED	(1) Life Care's corporate policies and practices to maximize ultra high billings; (2) targets set by Life Care management for Life Care regions, divisions and facilities related to ultra high billings and average lengths of stay; (3) pressure placed on Life Care division and/or regional personnel to meet corporate ultra high and/or length of stay targets; (4) Life Care's rewarding of facilities or employees that met or exceeded ultra high and/or length of stay targets; (5) Life Care's negative treatment of employees that failed to meet ultra high and/or length of stay targets; and (6) Life Care's knowledge of whether it was billing federal health care programs for therapy that was not reasonable or necessary and/or unskilled.
65	REDACTED	Former Physical Therapy Assistant at Life Care at Copper Basin		(1) Life Care's corporate policies and practices to maximize ultra high billings; (2) pressure placed on Life Care facilities and/or rehabilitation therapists to meet corporate ultra high and/or length of stay targets; (3) Life Care's negative treatment of employees that failed to meet ultra high and/or length of stay targets; (4) the provision of therapy that was not medically reasonable or necessary; and (5) the provision of therapy that was not skilled and/or not tailored to the needs of the particular beneficiary.

66	REDACTED	Former Rehabilitation Service Manager at Life Care Center at Inverrary		(1) Life Care's corporate policies and practices to maximize ultra high billings; (2) targets set by Life Care management for Life Care regions, divisions and facilities related to ultra high billings and average lengths of stay; (3) pressure placed on Life Care division and/or regional personnel to meet corporate ultra high and/or length of stay targets; (4) pressure placed on Life Care facilities and/or rehabilitation therapists to meet corporate ultra high and/or length of stay targets; (5) the involvement, if any, of physicians in therapy decisions; and (6) the assessment of patients at Life Care facilities and the preparation of MDS forms.
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